

SURVEY	DOT USE ONLY
1. Where were you COMING FROM when you received this survey?	In/Outbound
(check one)(0) Home (1) Work (4) School (8) Shopping (9) Recreation (7) Other	1 2
and location is (If from within survey area as shown on the map above, complete "1a" below; if not skip to "1b").	Document No.
1 a. Enter appropriate zone number from map above	015154
1b. City/Village/Town, CountyState,	
2. Where were you GOING TO when you received this survey?  (check one)(0) Home (1) Work (4) School (8) Shopping (9) Recreation (7) Other  and location is (If from within survey area as shown on the map above, complete "2a" below; if not skip to "2b").	Thru Trip 1 Yes 2 No
2a. Enter appropriate zone number from map above	Entrance
2b. City/Village/Town, CountyState,	
3. What type of vehicle were you driving? (1) Passenger Car (3) Light Truck or Van (5) Heavy Truck	Exit
4. How many people were in the vehicle: Thank you for your participation.	

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Date \_\_\_\_\_

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

ATTN: Travel Data

**Development Section** 

T120B4 494 (Town of Menacha)

## **BUSINESS REPLY MAIL**

FIRST-CLASS MAIL PERMIT NO. 2228 MADISON, WI

POSTAGE WILL BE PAID BY ADDRESSEE

DIVISION OF PLANNING & BUDGET RM 901 WISCONSIN DEPT OF TRANSPORTATION P O BOX 7913 MADISON WI 53791-8714







## Wisconsin Department of Transportation

## **Dear Motorist:**

We would like some information about your travel today. Your response is critical in helping us determine travel patterns. We use this information to help us make decisions regarding highway improvements.

Please complete the survey on the back using the map to assist you. Then refold as indicated and seal the survey so that the address with Business Reply Mail permit shows to the outside, and mail it back to us within two weeks. Postage has been prepaid.

All responses are strictly confidential. The information will only be used for statistical purposes. Your responses are very important. Please return this survey even if you returned one earlier.

Charles H. Thompson

Secretary

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Code ŝ 800 Interviewer (Initials) Social Eat Recreation Social Eat Recreation Social Eat Recreation DOCUMENT NO. 049551 **o** 6 O O **G** 2 No 2 8 2 No ă 췿 ğ E Shopping Shopping œ œ œ œ Other State | THRU TRIP (circle one) œ Other State THRU TRIP (circle one) 1 Yes
Route or Station No. THRU TRIP (circle one Route or Station No. Route or Station No. Hour Period Began 1 Yes Entrance Entrance School School School 4 4 4 4 4 Other State Medical Dental Medical Dental Medical Dental ന က က က က Survey Date TRANSPORTATION O & D SURVEY
EXTERNAL TRIP
Station No. Highway No. Survey Personal Business Personal Business Personal Business N N N N N 8 County County County Special Description Special Description Work Special Description Work Work ≤ ⊴ ≤ pue ğ Bud ⊴ MI MN IA Z Z Z M M Z Z W ₩ Base Former Base or Home Base or Home 0 0 0 0 0 0 Ξ Adjoining State Adjoining State Ξ Adjoining State ᆜ 닐 ⊒ e O O 800 8 ᆜ ᆜ TRIP PURPOSE TRIP PURPOSE TRIP PURPOSE DEST DEST DEST ORG ORG ORG (Wisconsin Only) Zone (Wisconsin Only) Zone C ity Township C ity Township C ity Township C ity Township C hy Township C ity Township No. Occupaents (1-9) No. Occupants (1-9) No. Occupants (1-9) (Wisconsin Only) DT1052-92 ᅙᇸ 7 7 / 2 OUTBOUND Somb Somb Bus Comb Somb Comb 9 ø 9 TRUCK & BUS TRUCK & BUS TRUCK & BUS 3**4**+ 3**A**+ 3**A**+ S S S (Circle Code Selection) 8 8 8 4 4 4 1 INBOUND Municipality Municipality Municipality Municipality Municipality Municipality Address Address Address Address က 8 Special Description က 쉱 က 엉 Special Description Special Description DEST ORG DEST DEST Study Name ORG ORG AUTO AUTO AUTO က